S S	FORM B For New Members, Candidates, and New Daytime Telephone:	andidates, and New Employees	Page 1 of 7 LEGISLATIVE RESOURCE CENTER 18 AUG - 1 AM 10: 29  OF THE CLARK U.S. HOUSE OF REPRESENTATIVE:
State: District:	(70 6 2, 2018 Staff Filer Type (If Applicable): Shared Principal Assistant	Check if Amendment  Period Covered: January 1,	(Office Use Only)  A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	THESE QUESTIC	SNC	
A. Did you, your spouse, or your dependent child:  a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? at b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	No Dead	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ing the reporting Yes X No United No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No Pr. D	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	r arrangement with an Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No J. D	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	or years? Yes X No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"  THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	ESPONDING SCHE	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" I INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO	S" O COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH	INFORMATION		OF THESE QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other ant child?	excepted trusts' need not be disclosed.	Have you excluded Yes No X
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	'income, or liabilities of a spo littee on Ethics.	ouse or dependent child because they me	eet all three tests for Yes No X

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Jason Craw

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≯	À	11	N		<u>r</u>			If you so choose, you may indicate their an asset of income source is that of your spouse (SP) or dependent child (DC), or jointly haid with anyone (JT), in the optional column on the far left.  For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you report a privately-traded fund that is Excepted investment Fund, please chack the "E box.	Exclude: Your personal residence, including ascorn romes and vacation homes (unless there was ranta noome during fire reporting period); and any financial needs in, or income derived from, a federa stirement program, including the Thifft Savings Plan	For an ownership interest in a privately-held busin that is not publicly studed, state the name of business, the nature of its activities, and geographic location in Block A.	For renkal and other real property held for investment provide a complete address or description, e.g. herital property," and a city and state.	or dam's and other cash excounts, to see the emount in all interest-beefing accounts. If the local is one 55,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	- 8	For all IRAs and other refrement plans (such as 00(k) plans) provide the value for each asset haid in	Provide complete names of stocks and mutual fund do not use only sicker symbols).	denitry (a) each sesset had tor investment or aroduction of income and with a fair merket value accepting \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned noome during the year:	Assets and/or Income Sources	
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Name: Jason Craw

## SCHEDULE C - EARNED INCOME

Name: Jason
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Page 5 of 7

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income simit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Battimore, MD (July 15)	Honorarium	\$0 0	\$600
EXAMPH95: CMI War Reundhable (Oct. 2) Onlando Country Board of Education	Spouse Speech Spouse Salary	\$6 \$6	\$1,000 WA
Holland + Hart LLP	Salary	447, 553	Z/≯
Jasona Gran P. C.	Salary	N/A	\$141,024
University of Colorado	Spowse Salary	\$53,935	\$81,704
Rocavery Fitness	payment for	4 (0, 000	N/A

#### SCHEDULE D - LIABILITIES

Name: Jason Crow

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances: liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, perent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

•		4		S. 7.		
	 	-	Example			
	ć	JP Morgan Chase	First Bank of Wilmington, DE	Creditor		
		5/17	5/96	Date Liability Incurred MO/YR		
	, 60	Mortgage on rental, Demo	Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	٧	
				\$15,001- \$50,000	59	
				\$50,001- \$100,000	C	
			×	\$100,001- \$250,000	0	
				\$250,001- \$500,000	Teg.	Amount of Liability
				\$500,001- \$1,000,000	ĵ,	t of Li
				\$1,000,001- \$5,000,000	g	ability
				\$5,000,001- \$25,000,000	æ	
				\$25,000,001- \$50,000,000	-	
		×		Over \$50,000,000	ı	
				Over \$1,000,000° (Spouse/DC Liebility)	*	

#### **SCHEDULE E - POSITIONS**

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Partner	Holland + Hart LLP (2018)
Partner	LASON A. Craw P.C., Showcholder in Holland + How LP (dissoved)
Member board	Δ.
Mamber board	Ė,

### SCHEDULE F - AGREEMENTS

Name: JOSON Crow	
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mployer.	9	dentify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service	
,	lan maintained by a former	ariod of government service;	

Date	Parties to Agreement	Terms of Agreement

# SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and the prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

government and only and match considered continuented as a result of a	geren intention of antimitation of a total or a principal reaction is law to the replacement install in expension of the second of expension of the second of expension of the second of
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
Pacovery Fitness, Rochuster, NY	Consulting Services